| | State of Idaho | | | DPW PROJECT NO. | | | |
|---|-------------------|--|---------------------|-----------------|-------------------------|------------------------------|--|
| DIVISION OF PUBLIC WORKS | | | | CODE | AMOUN | AMOUNT | |
| | | RACT CHANG | | CC | 7 | •• | |
| | | BY CONSTRUCTION | _ | | | | |
| To (Contractor) | (| | , | DATE | | | |
| Name and Location of Project | | | | CO No. Date | | | |
| THE CONTRACT IS C | HANGED AS FO | LLOWS: | | | | | |
| PR and/or CCD # Description of Change (If applicable) | | | | | | Change in Contract Amount | |
| | Total Contract A | previous Change Order(Amount prior to this Char <mark>decrease)</mark> in contract am | nge Order | r | \$ \$ \$ \$ \$ \$ \$ \$ | | |
| The revised date of Sul | bstantial Complet | | | | ment sha | calendar days. Il become an | |
| | | sions of the contract will ding upon the State of | | of Public | Works | ntil it is signed by | |
| the authorized repres | entative of the D | Division of Public Work | S. | | WOIKS U | nui it is signed by | |
| RECOMMENDED BY CM: | | Date | RECOMMENDED BY A/E: | | Da | ite | |
| ACCEPTED BY CONTRACTOR | | | | | | ite | |
| DPW FIELD REPRESENTATIVE [] Approved if less than \$10,000 [] Recommended if greater than \$10,000 | | | | | | ite | |
| DPW PROJECT MANAGER [] Approved greater than \$10,000, and less than \$20,000 [] Recommended if greater than \$20,000 | | | | | | ite | |
| DPW SENIOR FIELD REPRESENTATIVE [] Approved greater than \$20,000, and less than \$40,000 [] Recommended if greater than \$40,000 | | | | | | Date | |
| APPROVED BY DPW ADMINISTRATOR Required if greater than \$40,000 | | | | | | ite | |

Original: DPW Contract File Copies to: Contractor, CM, A/E, FR, PM, Agency, Fiscal

| | DPW Project No. | | | |
|--------------------------|------------------|--|--|--|
| JUSTIFICATION FOR CHANGE | Change Order No. | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |